# FORM D

### **UNITED STATES**

# SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Prefix		Serial
DAT	E RECEIVE	D

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Sale of Limited Liability Company Interests of PINNACLE VENTURES MANAGEMENT II, L.	L.C.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: New Filing Amendment	Section 4(6) ULQE
A. BASIC IDENTIFICATION DATA	/ //
1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  PINNACLE VENTURES MANAGEMENT II, L.L.C.	100 ED
Address of Executive Offices (Number and Street, City, State, Zip Code)  130 Lytton Avenue, Suite 220, Palo Alto, CA 94301	Telephone Number (Including Area Code) (650) 926-7800
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code) SED
Brief Description of Business Venture Capital Investment	V JUN 2 2 2005
Type of Business Organization  Corporation Dusiness trust Dimited partnership, already formed Dusiness trust Dimited partnership, to be formed Dusiness trust Dimited partnership, to be formed Dusiness trust	THOMSON FINANCIAL  : Limited Liability Company, already formed
Actual or Estimated Date of Incorporation or Organization:    Month Year     0 5   0 5     Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for St CN for Canada; FN for other foreign jurisdiction)	Actual Estimated rate:  D E

#### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following:							
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner							
Full Name (Last name first, if individual)							
Pelowski, Kenneth R.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
130 Lytton Avenue, Suite 220, Palo Alto, CA 94301							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)							
Curley, Robert A. Jr.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
130 Lytton Avenue, Suite 220, Palo Alto, CA 94301  Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)  Lee, Patrick C.							
Business or Residence Address (Number and Street, City, State, Zip Code)  130 Lytton Avenue, Suite 220, Palo Alto, CA 94301							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)  Savoie, Robert N.							
Business or Residence Address (Number and Street, City, State, Zip Code)  130 Lytton Avenue, Suite 220, Palo Alto, CA 9430							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)  Curley Family 1996 Trust							
Business or Residence Address (Number and Street, City, State, Zip Code)  26263 Mora Glen Drive, Los Altos Hills, CA 94024							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)  The Pelowski/Mirek Living Trust, Kenneth R. Pelowski and Lori P. Mirek, Co-Trustees							
Business or Residence Address (Number and Street, City, State, Zip Code)  3 Brady Place, Menlo Park, CA 94025							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)  Redpoint Pinnacle Holdings, Inc.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
3000 Sand Hill Road, 2-290, Menlo Park, CA 94025							
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)  [Click here and then on "Add Section A Page" if need to add more names. If not, delete this line.]							

					В.	INFOR	MATION A	BOUT OF	FERING				
1. Ha	Heads in the official of								Yes	No ⊠			
1. Па	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.												
2. W	What is the minimum investment that will be accepted from any individual?						****************	\$	N/A				
3. Do	Does the offering permit joint ownership of a single unit?								Yes ⊠	No			
				-	_								
	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more												
tha	an five (5)	) persons							rth the inforn				
	aler only. me (Last:		st, if individu	al)									
Busines	s or Resid	dence Ad	Idress (Numb	er and Street	, City, State	, Zip Code)		····					
	C 1 .												
Name o	it Associa	ited Brok	er or Dealer										
States in	n Which I	Person Li	isted Has Sol	icited or Inte	nds to Solic	t Purchasers							<del></del>
(Che	ck "All S	tates" or	check individ	duals States)	•••••							□ A	1 States
[AL	<b>L</b> ]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[M]	Γ]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last	name firs	st, if individu	ial)									
			***		-								
Busines	ss or Resid	dence Ac	ldress (Numb	per and Stree	, City, State	, Zip Code)							
Name o	of Associa	ated Brok	er or Dealer	<del></del>								<del></del>	
States in	n Which I	Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers	<u></u>						
												Па	II States
` [AI		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	ΙΙD
[IL	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[M	•	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
					[ · · · ]				,			,	<u> </u>
Full Na	me (Last	name fir	st, if individu	ial)									
Busines	ss or Resi	dence Ac	idress (Numb	per and Stree	t, City, State	, Zip Code)							
Name o	of Associa	ated Brok	er or Dealer			· • • • • • • • • • • • • • • • • • • •			· -				
			isted Has Sol							•			
·			check indivi						IDC:				ll States
(AI	•	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL) [M	•	(IN)	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[N]		[NE] [SC]	[SD]	[TN]	[TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH]	[OK] [WI]	[OR] [WY]	[PA] [PR]
[7]	· J	ام	[عام						is sheet, as n		[ 11 1]	[ ** 1 ]	[L IX]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	E OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other: Limited Liability Company Interests	\$2,020,202	\$ 2,020,202
	Total	\$2,020,202	\$ 2,020,202
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	12	\$2,020,202
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	m . c	<b>D.</b> W
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$50,000
	Accounting Fees		\$
		_	<b>*</b>
	Engineering Fees	IJ	\$
÷	Engineering Fees  Sales Commissions (specify finders' fees separately)  Other Expenses (identify)		\$ \$ \$_

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS				
	b. Enter the difference between the aggregate offering total expenses furnished in response to Part C - Questio proceeds to the issuer."	n 4.a. This difference is the "adjusted gross	ı	\$_1,970,202			
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.						
			Payments to Officers, Directors & Affiliates	Payments To Others			
	Salaries and fees		⊠ \$	□ \$			
	Purchase of real estate		<b>\$</b>	<b>S</b>			
	Purchase, rental or leasing and installation of machiner	<b>S</b>	<u> </u>				
	Construction or leasing of plant buildings and facilities	·	<b>s</b>	<b>S</b>			
	Acquisition of other businesses (including the value of used in exchange for the assets or securities of another	\$	S				
	Repayment of indebtedness		\$	□ s			
	Working capital		<b>S</b>	<b></b> \$ 1,970,202			
	Other (specify):		. 🗆 \$	□ s			
	Column Totals	. 🛛 \$	⊠ \$1,970,202				
	Total Payments Listed (column totals added)	\$ 1,970,202					
		D. FEDERAL SIGNATURE					
und	estimates issuer has duly caused this notice to be signed by the undersectaking by the issuer to furnish the U.S. Securities and Excredited investor pursuant to paragraph (b)(2) of Rule 502.	hange Commission, upon written request of its staff					
		ignatur	Date				
	MACLE VENTURES MANAGEMENT II, L.L.C. me of Signer (Print or Type)  T	itle of Signer (Print or Type)	June 2, 2005				
	17.	fanaging Member					
	•	•					
		,					
	•	ATTENTION					

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)